FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ashington, D.C. 20549	
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OMB APPROVAL	

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ction 30(h)	of the	e Investmen	t Cor	npany Act	of 1940								
Name and Address of Reporting Person* MCHALE JUDITH A				2. Issuer Name and Ticker or Trading Symbol HOST MARRIOTT CORP/ [HMT]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
	Last) (First) (Middle) DISCOVERY COMMUNICATIONS, INC. DNE DISCOVERY PLACE, 9TH FLOOR					of Earliest 2003	Trans	saction (Mon	ith/Da	ay/Year)	Officer (give title Other (specify below)								
(Street) SILVER SPRING MD 20910-3354			4. If Amendment, Date of Original Filed (Month/Day/Year) 6									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(City) (State) (Zip)																		
1. Title of Security (Instr. 3)			-Derivative S 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		3. 4. Secu Transaction Code (Instr.		4. Securi	sed of, or Benefici Securities Acquired (A) or isposed Of (D) (Instr. 3, 4			5. Amount Securities Beneficiall Owned Fol	y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) (D)	r P	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Restricte	d-Annual D	irector Stock Av												3,60)1	D			
			Table II - I (quired, D s, option						wned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		Securiti		and Amount of ies Underlying ive Security and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title		unt or ber of es		Transacti (Instr. 4)				
Non- Employee Director Def. Stock Units	\$0	09/30/2003		A		176.2218		09/30/2003 ⁰	(1)	09/30/2013	Common Stock	176	.2218	\$10.64	176.2218		D		
Non- Employee Director Def. Stock Units	\$0							01/31/2003 ⁽	(1)	01/31/2013	Common Stock	231	.9109		231.9109		D		
Non- Employee Director Def. Stock Units	\$0							02/28/2003 ⁽	(1)	02/28/2013	Common Stock	179	.4688		179.4688		D		
Non- Employee Director Def. Stock Units	\$0							03/31/2003 ⁽	(1)	03/31/2013	Common Stock	182	2.615		182.615		D		
Non- Employee Director Def. Stock Units	\$0							04/30/2003 ⁽	(1)	04/30/2013	Common Stock	158	.5289		158.5	289	D		
Non- Employee Director Def. Stock Units	\$0							05/30/2003 ⁰	(1)	05/31/2013	Common Stock	283	.9296		283.9296		D		
Non- Employee Director Def. Stock Units	\$0							06/30/2003 ⁰	(1)	06/30/2013	Common Stock	138	.9661		138.9	661 D			
Non- Employee Director Def. Stock Units	\$0							07/31/2003 ⁰	(1)	07/31/2013	Common Stock	250	.6265		250.6265		D		
Non- Employee Director Def. Stock	\$0							08/29/2003	(1)	08/29/2013	Common Stock	124	.9375		124.9	 375	D		

Explanation of Responses:

By: Elizabeth A. Abdoo For: Judith A. McHale

** Signature of Reporting Person

10/01/2003

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

 $Note: File three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.